

# 59<sup>th</sup> Medical Wing

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**U.S. AIR FORCE**

## 59 MDW Orthopedic Clinic Product Line Analysis Clinic Input

Information Brief

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***Integrity - Service - Excellence***

# Overview

- Current/Future Problem Areas
- Possible Solutions
- Clinic Issues
- CAMO Interface

# Overview

- Orthopedic flight
  - Ortho clinic
  - Podiatry
  - Orthotics (Brace Shop)

# Overview

- Orthopedic Flight
  - Ortho Clinic
  - Podiatry
  - Orthotics (Brace Shop)

# Overview

## - Ortho Clinic

- 11 Physicians *(Authorized 11)*
- 3 (1 Oct- "4") Physician Assistants *(Authorized 2AD)*  
*(Authorized 2 SCO)*
- 2 RNs *(Authorized 1-AD, 1- SCO)*
- 14 ortho techs
  - 9 AD *(Authorized 14)*
    - » 2 NCO positions
    - » 1 @ Podiatry
  - 3 SCO *(Authorized 4)*
    - » 1 Radiology SCO
- 5 Admin
  - 2 GS *(Authorized GS-11 4-A, 4 GS Admin)*
    - » 2 Secretaries
  - 2 AD *(Authorized 3)*
  - 1 SCO *(Authorized 1)*

# Overview

- Podiatry
  - 3 Podiatrists *(Authorized*  
3)
  - 1 Ortho tech *(Out of hide)*

# Overview

- Orthotics (Brace Shop)
  - 2 GS – 10 *(Authorized 2GS)*
  - 5 AD *(Authorized 5 AD)*

# Overview

- Orthotics
  - 5 orthotic techs
    - 2 GS techs
    - 3 AD techs



# Areas of Concern

## Current/Future Problem Areas

- **Problem Areas**
  - Deployments
  - OR time/Consults
  - GME
  - Space Issues
  - Coding
  - Staffing
  - Clinic Issues

# Areas of Concern

## Current/Future Problem Areas

- **Where will you focus your efforts?**
  - Finding alternative resources for OR time
  - Protecting GME
  - Maximizing our clinic space
  - Coding accuracy
  - Maximum efficiency from staff
  - Adjusting to various clinic issues

# Areas of Concern

**Deployment**, GME, **OR**, Space, Coding, Staff, Clinic Issues

- OR (Influenced by deployments)
  - Created a part-time schedule for providers
    - 2 clinic days/ 3.5 starts/doc/mo
    - Worked to protect the GME program
    - Booking in Dec/Jan for surgery
    - “Fitting in” trauma cases
    - At what point do we defer consults

# Areas of Concern

**Deployment**, GME, **OR**, Space, Coding, Staff, Clinic Issues

- Can't maximize OR time
  - Contract RN's can't be paid OT
    - Follow-on cases that don't get to start
  - Impact on the floor (beds)
  - Bed space impacting OR starts

# Possible Solutions

**Deployment, GME, OR, Space, Coding, Staff, Clinic Issues**

- OR Time
  - SCO Money
    - Could not hire PA; would like to hire CRNA (hourly)
      - Money from Oct '03 through Sep '04 available
    - Can provide the PACU/SDS support 1 day/wk
      - Can do scopes/utilize other day
  - Have the tech for the OR
    - Keeps up:
      - » Skills for deployment
      - » Morale
      - » Patients in house-cost savings & training for GME

# Possible Solutions

**Deployment**, GME, **OR**, Space, Coding, Staff, Clinic Issues

- Better use of staff
  - Use Med-Surg nurses from clinics one/day/wk
    - Keeps skills sharp for mobility
  - Anesthesia arrive 5 minutes early
    - Arriving at 0655 for 0700 start
  - Create flex time in their schedule (contract)

# Possible Solutions

**Deployments**, GME, **OR**, Space, Coding, Staff, Clinic  
Issues

- Utilization of Local Rooms
  - Develop policy on availability/utilization of rooms fitted as local rooms
  - Certify RNs for conscious sedation
    - Benefits:
      - Hand team
      - Podiatry

# Possible Solutions

**Deployments, GME, OR, Space, Coding, Staff, Clinic Issues**

- “Flip-Flop” Rooms to max OR utilization
  - Regular scheduled room is used
  - Concurrently, “closed” room is prepped
    - Variations:
      - Bring in patient when first room is being completed
      - Sr. resident can start 2<sup>nd</sup> case/close on 1<sup>st</sup> case
        - » Prevents loss of time due to prepping/clean-up or turn-over



# Areas of Concern

**Deployment, GME, OR, Space, Coding, Staff, Clinic Issues**

- GME (Influenced by deployments)
  - Sub-specialty is lost for 4-5 months
    - Clinics must now absorb non-surgical patients
  - Need oversight for 12 residents annually
  - Potential loss of OR training

# Possible Solutions

**Deployments, GME, OR, Space, Coding, Staff, Clinic Issues**

- GME
  - MOU with local providers- Disadvantages
    - Costly, though less than TDY to MTF
      - \$36K- \$60K for non-local TDYs
      - Cost of annual medical insurance/3 month rotation
    - Inconsistent training/Quality of training
    - MOU agreement with local provider may change annually
    - Impacts call schedule - must maintain 80hr/wks
    - Decreased military training

# Possible Solutions

**Deployments, GME, OR, Space, Coding, Staff, Clinic Issues**

- GME
  - MOU with local providers- Advantages
    - UTSA/BAMC- Level I trauma = similar training
      - (UTSA is used currently; tough to add more students to their system)
    - Slightly more oversight
    - Decreased cost (vs. MTF training)
    - Large pool of orthopedic surgeons in San Antonio

# Possible Solutions

**Deployments, GME, OR, Space, Coding, Staff, Clinic  
Issues**

- GME – protecting the problem
  - Created team approach to maintain OR experience
    - Residents have 2 OR days/wk

# Areas of Concern

Deployment, GME, OR, **Space**, Coding, Staff, Clinic Issues

- 6-7 Clinics running M-F
  - 13 exam rooms available
    - 2 rooms/provider
    - 3 rooms to be built (?1 Oct?)
      - 2 exam rooms
      - 1 office

# Possible Solutions

Deployment, GME, OR, **Space**, Coding, Staff, Clinic Issues

- Space
  - Ortho
    - Doubled up some staff
    - Using treatment room as exam room
    - Initiate some long term plans to adjust current clinic space
    - Work space and resident call rooms are minimal for number of residents
  - Brace shop lost 1 fitting room to an office
  - Need an additional 13 rooms/ 4 rooms/doc
  - Would like to expand to Brace Shop or General Surgery

# Areas of Concern

Deployment, GME, OR, **Space**, Coding, Staff, Clinic Issues

- Podiatry
  - Have 4 exam rooms
  - 2 small supply closets
  - Check-in area= NCO's office
  - Would benefit from having local room
- Location! Chronically not wanted at 6612

# Areas of Concern

Deployment, GME, OR, **Space**, Coding, Staff, Clinic Issues

- Minimal Area for Improvement
  - Not much room left to maximize
    - Exam rooms are small
- Move
- Need an additional 3 rooms minimal



# Areas of Concern

Deployment, GME, OR, **Space**, Coding, Staff, Clinic Issues

- Brace Shop
  - Other space
    - Bldg 4600- used for small pox
    - Bldg 4610- used by reserves
- Must meet unique power, plumbing and ventilation requirements

# Areas of Concern

Deployment, GME, OR, **Space**, Coding, Staff, Clinic Issues

- Ideally, 5 rooms
  - Open work area
  - 2 Fitting rooms
  - Mud room
  - Oven room
  - Machine area

# Areas of Concern

Deployment, GME, OR, Space, Coding, Staff, **Clinic Issues**

- Manning- (per '99 man power study)
  - 100% manned- based on poor data (coding)
    - Data is approx 1 staff for every 100 people; almost 9 staff needed
  - 5 military; 2 civilian (1 full-time instructor)
    - Full-time instructor slot was deleted off of the MAPG

# Areas of Concern

Deployment, GME, OR, Space, Coding, Staff, **Clinic Issues**

- Budget
  - Increased use from other providers
    - Adult Family, Kelly, OB, Peds
    - Approximate 36% increase from FY '03
  - Patient visits expected to increase to 850
    - Increase in Ortho staff
  - Increased off the shelf items
    - Not included in budget????

# Areas of Concern

Deployment, GME, OR, Space, Coding, Staff, **Clinic Issues**

- Budget
  - Need \$10K for TDY funds- to maintain current with technological changes/retirements
    - Boston Course- \$5K (MA)
    - Helmet course - \$3K (FL)
  - Need equipment to maintain pace with demand
    - \$20 K for Ortho grinders
  - Coders started 1 month ago

# Areas of Concern

Deployment, GME, OR, Space, Coding, Staff, **Clinic Issues**

- *Only Orthotic Training Site in DoD!!*
- Oversight is by Sheppard AFB
- Course awards the 4J032A AFSC
  - 23 AF wide; 6 bases
    - 3 projected for Sep '04- 1 inbound;
    - 3 projected for June '05
      - Problems with AFPC advertising position
      - This year, advertisement was word of mouth
      - Applications due 6 mo prior to start

# Areas of Concern

Deployment, GME, OR, Space, Coding, Staff, **Clinic Issues**

- School Budget
  - Total consumed for a class-\$4,000
    - \$6K funded last year
  - No money, no students for 6 months
    - Lag due to 50 wk course to 30 wk course
    - Students are a Shred-out now vs. Pipeline
  - '05 will have 2 classes -- will run out of money
    - Projected \$8K budget deficit
    - No '05 budget projected as of yet

# Areas of Concern

Deployment, GME, OR, Space, Coding, **Staff**, Clinic Issues

## - Technician staffing

- Increased providers, but not techs
- Podiatry given tech out of hide
  - 1 tech for 3 docs + admin work
  - Revamping tech schedules to accommodate; more change in mind-set
- Admin tech for ortho
  - 3 techs in 10 months; arrive with separation date!

## - Need at least 3 techs

- We're authorized 6 more techs
- Will need the 6 total if we loose the SCO money in '06



# Areas of Concern

Deployment, GME, OR, Space, Coding, Staff, **Clinic Issues**

- Coding
  - Podiatry
    - met with their coder last week
    - Determined some improvements to be made
  - Ortho
    - Coders will move into clinic today
    - Missing coding for supplies
    - “Issues” with getting transcriptions back

# Possible Solutions

Deployment, GME, OR, Space, **Coding**, Staff, Clinic Issues

- Design overprints specific to each clinic
- Coders will help design to ensure max level of coding

# Areas of Concern

Deployment, GME, OR, Space, Coding, Staff, **Clinic Issues**

- Coding- Reference the Benchmark RVUs
  - Orthotics
    - Were coding their own until August
    - MEPRs
    - Determined problem areas and corrected “providers” with last falls SAV
      - CPT codes reflect “orthotics fitting and training...” as number one of top 10 items for their clinic
  - Credentialed coder just started 1 mo ago
    - Would like to use “ortho” coder- her emphasis is orthopedics

# Areas of Concern

Deployment, GME, OR, Space, Coding, Staff, **Clinic Issues**

- Xray
  - 2 machines in clinic
    - 1 portable - can do hands, ankles, elbows
    - 1 large machine - standing bilat knees, ect
  - **Huge** bottle neck for clinic
    - Placed admin tech to check-in patients
    - Xray techs can focus on films

# Areas of Concern

Deployment, GME, OR, Space, Coding, Staff, **Clinic Issues**

- Large machine is down ave. 2-3 times/wk
  - Broke-Tuesday, will be down for minimum 2 wks
  - Pts must go upstairs (including immobile pts)
  - Clinic is running 2-3 hours behind
    - Notified Wing Advocate of potential increase in complaints

# Areas of Concern

Deployment, GME, OR, Space, Coding, Staff, **Clinic Issues**

- We must do all scoli films in clinic
  - We have the only machine that will allow films to be made into hard copy (2wk window)
  - Disruptive to clinic
    - Tried to limit to appts on Friday afternoon
    - Takes 30 minutes to complete a film (not print it off)

# CAMO Interface

Deployment, GME, OR, Space, Coding, Staff, **Clinic Issues**

- CAMO is working well
- Would like them to manage 72 hr consults
  - Triaged by doc in CHCS
  - Contract prohibits
  - Will have an answer by Friday
- Started managing Podiatry on 9/9/04
- No problems foreseen with communication



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